09/

Authorized Signature

Typed or printed name __Marc_A. Rossi

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE AI		(CXX	E 400 have	: A certificate of mages; Transmittal, This or s. Each additional parts own certificate o	certificate cannot be used for aper, such as an assignment finalling or transmission.	r any other accompanying t or formal drawing, must
37013 7590 ROSSI, KIMMS & P.O. BOX 826 ASHBURN, VA 2014 25/2008 HVUONG2 00000		··· /	9, 5 1008 U I her State address trans	Certify that this is Postal Service wit essed to the Mail Smitted to the USPTC	icate of Mailing or Transm Fec(s) Transmittal is being h sulficient postage for first from ISSUE FEE address so 0 (571) 273-2885, on the da	deposited with the United class mail in an envelope above, or being facsimile to indicated below.
52\\$008 HANDNGS 00000;	103 10520951	37	Miles	arc A. Ros	iši /	(Depositor's name)
FC:1501 FC:1504 FC:8001	1440.00 300.00 9.00	ÖP	FRAUL	19-2	5-1008-	(Signatura) (Data)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/520,951 01/11/2005			Noriyuki Matsukaza		FUJ1:329	4879
TITLE OF INVENTION: ORC	ANIÇ MULTICOL	OR EMISSION AND D				
APPLN, TYPE SM	MALL ENTITY	issue fre due	Publication fee due	PREV. PAID ISSUE		DATE DUE
nonprovisional	NO	S1440	\$300	\$n -	\$1740	09/29/2008
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS			
QUARTERMAN, KEVIN J		2889	313-506000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (i) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
(A) NAME OF ASSIGNED FUJI ELECTI	n assignee is identil 7 CFR 3.11. Compl 3 RIC HOLDII	fied below, no assigned letion of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY D.	atent. If an assignonassignment, and STATE OR CO JAPAN		•
Please check the appropriate a	ssignee category or	categories (will not be pr	rinted on the patent) : \Box	Individual 🖾 Cor	poration or other private gro	rup entity Government
4a. The following fee(s) are su 13d Issue Fee 23d Publication Fee (No sm 23d Advance Order - # of C	all entity discount po		b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee overpayment, to Deposit Account Number			
5. Change in Entity Status (f	ALL ENTITY status	s. See 37 CFR 1.27.			L ENTITY status. Sec 37 Ci	
NOTE: The Issue Fee and Pub interest as shown by the record						

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

31,923

Registration No. _

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.





PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Noriyuki MATSUKAZE

Serial No.: 10/520,951

Filed: January 11, 2005

ORGANIC MULTICOLOR EMISSION

AND DISPLAY DEVICE AND METHOD Title:

FOR MANUFACTURING SAME

Group Art Unit: 2889

Examiner: Quarterman, Kevin J.

Attorney Docket No.: FUJI:329

Confirmation No.: 4879

Certificate of Filing By Facsimile I hereby certify that this paper is being transmitted via facsimile to the United States Patent & Trademark Office, Mail Stop ISSUE FEE, at telephone number 571-273-2885,

DATE:

BY:

MARC A. ROSSI

MAIL STOP ISSUE FEE COMMISSIONER FOR PATENTS P.O. Box 1450 ALEXANDRIA, VA 22313-1450

FACSIMILE TRANSMISSION COVER SHEET

Enclosed herewith is:

Fee Transmittal

1 Page

Credit Card Payment Form

1 Page

Total Including this Cover Sheet

3 Pages

Any questions related to this transmission should be directed to Marc A. Rossi at Rossi, Kimms & McDowell LLP at telephone number 703-726-6020.

CONFIDENTIALITY NOTICE: THIS FAX IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENT(S) NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT(S) OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT(S), YOU HAVE RECEIVED THIS FAX IN ERROR, AND THAT YOU ARE NOT AUTHORIZED TO REVIEW. DISSEMINATE. DISTRIBUTE OR COPY THIS FAX. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY THE SENDER IMMEDIATELY. THANK

COVER SHEET 1